

University of Bolton
UBIR: University of Bolton Institutional Repository

Psychology

2008

A feminist psychodynamic group therapy for obese women

Colleen Heenan
University of Bolton

Heenan, Colleen. "A feminist psychodynamic group therapy for obese women." (2008).

This Conference Paper is brought to you for free and open access by the Psychology at UBIR: University of Bolton Institutional Repository. It has been accepted for inclusion in Psychology: Conference Papers by an authorized administrator of UBIR: University of Bolton Institutional Repository. For more information, please contact ubir@bolton.ac.uk.

Dr Colleen Heenan, Senior Lecturer, Psychology Department, The University of Bolton,
Deane Road, Bolton BL3 5AB, 01204-903934, ch10@bolton.ac.uk

Conference: Appearance Matters

Title: A Feminist Psychodynamic Group Therapy for Obese Women

Introduction: Feminist theorists argue that eating problems are not psychiatric disorders or 'slimming diseases' but complex expressions of women's gendered identities. At the same time, feminist psychodynamic therapists suggest that, much 'misuse' of food stems from its unconscious links with unresolved emotional issues – issues which are often generated by gender inequalities and certainly exacerbated by them. This presents dilemmas for the feminist clinician whose aim is to facilitate change. While a feminist psychodynamic framework is crucial in this type of work, my experience suggests it is helpful to combine this with cognitive and behavioural interventions. This provides a pedagogic framework in which struggles with food, eating and body size can be seen not as moral failings but as women's attempts to care for themselves; attempts which are often overshadowed by caring for others.

Outline: In this paper I present material from a one year therapy group for obese women which adapted aspects of Orbach's 'Fat is a Feminist Issue', a psychodynamic model for working with compulsive eaters, within a psycho-educational approach. The intention was to facilitate understanding of the connections between socially constructed frameworks of femininity, individual emotions and bodily sensations. This was in order to enable women to articulate their needs and find more satisfying ways of getting these met, rather than express these through compulsive eating or excess weight. The aim of the group was to help women understand how they used food for emotional purposes, and to make lasting changes in their diet and lifestyle.

Background: The group is part of a research project headed up by Professor Julia Buckroyd at the University of Hertfordshire, who is developing interventions in obesity. Professor Buckroyd (2007). Buckroyd's group work model draws on the work of a number of feminist psychotherapists in the UK - such as Susie Orbach (1978,1982,1985,1986), Marilyn Lawrence (1984,1987), Mira Dana (date), and myself (dates) – who have worked with and written about the gendered nature of eating disorders. Women's therapy centres in London and Leeds have been piloting different therapeutic models which go against the trend to treat obesity as either a physical problem requiring a medical response, as a moral failing rather than a 'proper disorder' or a by-product of changes in contemporary western lifestyles. Whatever approach one

takes to the subject, it is clear that a number of people who, despite feeling greatly distressed and incapacitated by their weight, are unable to lose a significant amount of weight – and to maintain that weight loss. While reduction diets can be successful, evidence suggests that by approximately 2 years after dieting, most people will return to their base line weight while 5 years later, almost all return to their base line weight.

Before going on to describe the group in greater detail, I think it is worth mentioning something about the discourses surrounding eating disorders. The label 'eating disorder' is contentious as it suggests there is something called 'normal eating' which we all know is socially, culturally, class and gender specific. There is a current 'moral panic' over obesity and 'excessive' eating in contemporary western society – to the point where obese people are now deemed to be responsible for the growing shortage of food in the world. At the same time, the link between the amount of food consumed plus body size and shape is itself contentious; what defines 'normal weight' or obesity has changed over the years and no doubt, will change again. This is because eating more than is physically necessary, or eating 'unhealthy' or unnecessary food is 'normal' in relatively affluent societies today – or has been, until recently. In turn, this makes terminology & 'diagnosis' difficult.

As a feminist psychotherapist, when a woman tells me she feels out of control around food, my concern is to understand her distress, albeit within a psycho-social context. As such, I use the term 'eating disorder' in a strategic way; it can be useful as a way to facilitate access to psychological help for compulsive eaters and obese women who are often seen as not warranting serious attention – or access to health services. In addition, the term can provide a framework for describing what women often experience as individual madness, greed or failure. However, I am well aware of the contentious and discursive nature of medical, psychiatric and psychological terminology. At the same time, there are serious psychological consequences to being perceived as seriously overweight or obese such as discrimination, poor self esteem, depression and isolation (Brown, date). Indeed, there is a moral panic about obesity whereby excess body weight is blamed for the ills of the world, including the growing shortage of staple foods.

Food & Emotions: The intervention I am going to talk about today is focused on those women who are not helped by the numerous 'quick fix' reduction diets and exercise programmes readily available. The term 'compulsive or emotional eater' describes someone who feels 'out of control around food'. This could take the format of binge

eating large amounts of food, of continually over-eating at meals, of yo-yoing back and forth between weight loss and gain, or of never losing the extra pounds despite feeling unhappy with this weight. The compulsive eater is someone who eats in response to emotions, someone who struggles to identify and express emotions, and someone whose thinking is externally orientated; that is, someone who is overly or unhelpfully responsive to external cues (in this case, of food), than responsive to internal emotions or feelings.

Structure & Format of the Group: The aim of the group was to provide a long term intervention which addressed some of these underlying difficulties, with a view to achieving and maintaining a weight reduction of 10%. The group ran over a 36 week period, 2 hours per week. The group was run by my self, a feminist psychodynamic psychotherapist and a second clinician who had experience of working with women in 'healthy eating programmes'. In addition, the participants were strongly encouraged to develop a 'buddy' system whereby they contact each other in between sessions, and after the group, to foster support amongst their selves. Further, there is a 2 year post-group 'follow up' which involves regular telephone support with the participants and my self. Finally, as one of Buckroyd's aims is to foster evidence-based therapy, the group received NHS Ethical clearance in order to record a number of pre & post measures although I am not going to focus on these. The group was open to women with a BMI > 30 who were willing to take part in this type of intervention.

There were 3 'stages' to the group: for instance, the cognitive-behavioural focus of **Weeks 1-12** was to identify eating patterns & planning meals, motivations for change (which could often be conflicting), and beliefs about particular foods (this piece of chocolate will make me feel great, I have to have this second helping). The psychodynamic focus was to identify ways in which families used food, to explore feelings about bodies and to introduce the idea that there may be unconscious reasons for eating inappropriately. This was a particularly difficult task in that most women felt very shamed and perplexed about their behaviour, and struggled with the idea that they were worth thinking about in great detail. Each session included a range of activities to facilitate this e.g. following a guided fantasy in which women are taken back to childhood eating situations such as family meals. The focus is on the dynamics of the situation: who gets fed first, who gets the largest portion, where is mother. In addition, old "messages" about eating and body size/shape are articulated and explored for their contemporary salience.

In **Weeks 13-24**, the cognitive-behavioural continued to focus on monitoring eating patterns & meal planning, plus understanding how impediments to change can affect behaviour (often minor ‘hiccups’ triggered participants to give up), and finding alternative strategies to using food inappropriately. The psychodynamic focus continued to work on the idea that there may be unconscious reasons for eating with attempts to name emotions and feelings, as well as looking at how these could be met. This was also the time when the idea of **‘Buddying’** was introduced. Here, we encouraged participants to exchange telephone numbers in order to make contact with each other in between the groups. This was a very alien idea for participants who were not used to thinking that it was either possible to ask for help, nor that anyone would be interested in responding. One of the fantasy exercises we did was to ask women to spend time in front of full-length mirrors, preferably in the nude. What parts of their bodies do or don’t they notice? What thoughts or feelings do they have about these? What sorts of bodies do they feel they need as women? This exercise aims to help women “own” their bodies as they are now rather than in fantasy, to locate the gendered projections made about parts of bodies e.g. “fat” bums as unacceptable parts of selves. This exercise usually highlights the way in which women’s bodies are so central to identity and so easily used to condemn.

In **Weeks 25-36**, the cognitive-behavioural focus was to increase physical movement through a range of appropriate activities (there were considerable mobility difficulties in the group due to a combination of physical disability and excess weight). Here, the buddy system proved helpful as members met up to go for walks, to swim, to do aqua aerobics or go to the gym. In addition, getting family members to increase activity through simple things like going for a walk after meals, proved very helpful. The psychodynamic focus continued to attempt to name emotions and feelings, to look at how these could be met, and equally importantly, to find ways to let emotions emerge without responding by eating. Fantasy exercises included asking women to fantasise about becoming fatter and thinner in social situations and exploring how they felt in these differently-sized bodies – particularly noting issues around their sexuality, own and others’ authority and the quality and tone of interactions. This exercise helps explore the hopeful, frightening and often contradictory fantasies women may have about the power of their bodies now and in the future

In addition to participating in the weekly sessions, participants were asked to do a number of tasks in between groups. Examples of this **‘Homework’** include daily ‘Food

& Mood' charts. Here participants were asked to record not just what they ate or drank but to note the context (on own, with another, sitting, standing, etc) and the emotions before, during and after eating. The aim of this was cognitive: to gain better awareness of eating patterns, psychodynamic: to highlight times when eating occurred in response to emotion, and behavioural: to gradually make alternative responses to needs, other than eating. Meal planning encouraged participants to structure their eating choices more carefully: for some this involved ensuring they did not leave long gaps in between eating (gaps may encourage binge eating), for others it helped to have food in the house which could be used to make a meal, while for others it helped to identify suitable food to take to work. For those women feeding children, the meal planning and subsequent food shopping often enabled them to think more carefully about how much 'junk' food their children were consuming; junk food which they often ended up eating.

I am aware that I have only given a brief outline of the obesity therapy group. Some of you may be wondering about 'results': of the 7 women who completed the group, 2 reduced their weight by 20%, 2 reduced their weight by 10% and for the remaining 3, their weight stabilised. One year after the group, one of the participants whose weight had remained stable, began to lose weight and make considerable changes in her life. All the women felt that they had learned a great deal about themselves, were more aware of emotions, more able to put these into words and had good alternative strategies other than using food. Two of the women in the group found it very difficult to even contemplate changing eating patterns, despite increased awareness of the unconscious reasons why they 'emotionally' ate. For many, their self esteem improved as did their relationships with partners. The 'buddy' relationships were extremely important and continued to stay in touch with each other to varying degrees. At 2 years of follow-up, through regular telephone contact, those who initially lost weight, have managed to maintain the weight loss. However, those who lost minimal amounts of weight, have not had further success. On the other hand, they have not gained weight.

Conclusion: Feminist psychodynamic theorists have offered numerous insights into the psychosocial aspects of eating disorders which have been particularly helpful in understanding compulsive eating and obesity – eating problems which have been under-researched from a psychodynamic perspective. However, it remains a considerable and constant challenge to enable women to construct satisfying relationships with their bodies. There is a need to integrate psychodynamic and feminist

interpretation of these gendered issues with cognitive-behavioural interventions. For instance, extending the 'social situation' fantasy to everyday experiences such as imagining oneself getting bigger or smaller doing mundane tasks like washing dishes or gardening, encourages women to make ongoing connection between cognition, behaviour and emotion. This can be incorporated into imagining what would happen if one didn't binge, eat excessively, or eat when not hungry.

While one might well ask, 'What is feminist about this?', I suggest that what underpins these tasks is the need to facilitate women's right and capacity to 'have a voice'; that is, a voice that uses words, not eating and body size, to know about and express feelings through the accepted currency of language. In addition, experimenting with behavioural changes in fantasy may help some women to think about how to manage potentially dangerous situations, like the husband who may well be violent if his wife doesn't prepare the evening meal.

Bibliography

- Bloom, C., Gitter, A., Gutwill, S., Kogel, L., Zaphiropoulos, L. (1994) Eating Problems: A Feminist Psychoanalytic Treatment Model. New York: Basic Books.
- Buckroyd, J. & Rother, S. (2007) Therapeutic Groups for Obese Women: A Group Leader's Handbook
- Cushman, P. (1995) Constructing the Self, Constructing America: A Cultural History of Psychotherapy www.decapopress.com:DeCapo Press.
- Dana, M. and Lawrence, M. (1988) Women's Secret Disorder: A New Understanding of Bulimia. London: Grafton Books.
- Dolan, B. and Gitzinger, I. (1991) Why Women? Gender Issues and Eating Disorders. London: European Council on Eating Disorders.
- Eichenbaum, L. and Orbach, S. (1982) Outside In, Inside Out. Harmondsworth, England: Penguin.
- Fairbairn, W.R.D. (1952) Psychoanalytic Studies of the Personality Routledge: London
- Fallon, P., Katzman, M. and Wooley, S. (eds) (1994) Feminist Perspectives on Eating Disorders. London: Guilford Press.
- Farrell, E. (1995) Lost For Words: The Psychoanalysis of Anorexia and Bulimia. London: Process Press.
- Greenberg, J.R. and Mitchell, S.A. (1983) Object Relations in Psychoanalytic Theory. Cambridge, Massachusetts: Harvard University Press.
- Grogan, S. (1999) Body Image: understanding body dissatisfaction in men, women and children. London: Routledge.
- Heenan, M.C. (2008) A feminist psychotherapeutic approach to working with women who eat compulsively. In J. Buckroyd & S. Rother (eds) Psychological Responses to Eating Disorders and Obesity: Recent and Innovative Work. Chichester: J. Wiley & Co.
- Heenan, M.C. (2007) Feminist Object Relations Theory and Eating 'Disorders' – Contributions and contradictions. In S. Riley, M. Burns, H. Frith, S. Wiggins & P. Markula (eds) Critical Bodies: representations, practices and identities of weight and body management. London: Palgrave Press.
- Heenan, M.C. (2005) 'Looking in the Fridge for Feelings': The Gendered Psychodynamics of Consumer Culture, in J. Davidson, L. Bondi & M. Smith Emotional Geographies Burlington, VT & Aldershot: Ashgate.
- Lawrence, M. (1984) The Anorexic Experience. London: Women's Press.

- Lawrence, M. (ed) (1987) Fed Up and Hungry: Women, Oppression and Food. London: Women's Press.
- Lawrence, M. and Maguire, M. (eds) (1997) Psychotherapy with Women: Feminist Perspectives. Basingstoke, UK: Macmillan
- MacSween, M. (1993) Anorexic Bodies: a Feminist and Sociological Perspective on Anorexia Nervosa. London: Routledge.
- Nasser, M., Katzman, M. and Gordon, R. (eds) (2001) Eating Disorders and Cultures in Transition. Hove, UK: Brunner-Routledge.
- Orbach, S. (1978) Fat is a Feminist Issue. London: Paddington Press.
- Orbach, S. (1982) Fat is a Feminist Issue...II. London: Hamlyn Paperbacks.
- Orbach, S. (1985) Accepting the Symptom: a Feminist psychoanalytic Treatment of Anorexia Nervosa, in D.M. Garner and P.E. Garfinkel (eds) Handbook of Psychotherapy for Anorexia Nervosa and Bulimia. New York: Guilford Press.
- Orbach, S. (1986) Hunger Strike. London: Faber and Faber.
- Thompson, B. (1994) A Hunger so Wide and so Deep: American women speak out on eating problems. Minneapolis: University of Minnesota Press.
- Trepagnier, B. (1994), 'The Politics of Black and White Bodies', in Feminism and Psychology, Special Issue on Shifting Identities, Shifting Racisms. 4(1):199-205.